HEDIS® Tip Sheet Initiation and Engagement of Substance Use Disorder Treatment (IET)

Measure Description

The percentage of new substance use disorder (SUD) episodes that result in treatment initiation and engagement. Two rates are reported:

- Initiation of SUD Treatment: The percentage of new SUD episodes that result in treatment initiation through an inpatient SUD admission, outpatient visit, intensive outpatient encounter, partial hospitalization, telehealth visits or medication treatment within 14 days.
- **Engagement of SUD Treatment**: The percentage of new SUD episodes that have evidence of treatment engagement within 34 days of initiation.

Product Lines: Commercial, Medicaid, Medicare, Exchange

Intake Period: November 15 of the year prior to the measurement year–November 14 of the measurement year. The intake period is used to capture new SUD episodes.

2024		2025											
Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
	MY 2025 Intake Period (Nov 15, 2024 – Nov 14, 2025)												

Codes Included in the Current HEDIS® Measure

Description	Code
Alcohol Abuse and	ICD-10: F10.10, F10.120, F10.121, F10.129-F10.132, F10.139, F10.14, F10.150, F10.151,
Dependence	F10.159, F10.180-F10.182, F10.188, F10.19, F10.20, F10.220, F10.221, F10.229-F10.232,
	F10.239, F10.24, F10.250, F10.251, F10.259, F10.26, F10.27, F10.280-F10.282, F10.288,
	F10.29
Opioid Abuse and	ICD-10: F11.10, F11.120-F11.122, F11.129, F11.13, F11.14, F11.150, F11.151, F11.159,
Dependence	F11.181, F11.182, F11.188, F11.19, F11.20, F11.220-F11.222, F11.229, F11.23, F11.24,
	F11.250, F11.251, F11.259, F11.281, F11.282, F11.288, F11.29
Other Drug Abuse and	ICD-10: F12.10, F12.120-F12.122, F12.129, F12.13, F12.150, F12.151, F12.159, F12.180,
Dependence	F12.188, F12.19, F12.20, F12.220-F12.222, F12.229, F12.23, F12.250, F12.251, F12.259,
	F12.280, F12.288, F12.29, F13.10, F13.120, F13.121, F13.129-F13.132, F13.139, F13.14,
	F13.150, F13.151, F13.159, F13.180-F13.182, F13.188, F13.19, F13.20, F13.220, F13.221,
	F13.229-F13.232, F13.239, F13.24, F13.250, F13.251, F13.259, F13.26, F13.27, F13.280-
	F13.282, F13.288, F13.29, F14.10, F14.120-F14.122, F14.129, F14.13, F14.14, F14.150,
	F14.151, F14.159, F14.180-F14.182, F14.188, F14.19, F14.20, F14.220-F14.222, F14.229,
	F14.23, F14.24, F14.250, F14.251, F14.259, F14.280-F14.282, F14.288, F14.29, F15.10,
	F15.120-F15.122, F15.129, F15.13, F15.14, F15.150, F15.151, F15.159, F15.180- F15.182,
	F15.188, F15.19, F15.20, F15.220-F15.222, F15.229, F15.23, F15.24, F15.250, F15.251,
	F15.259, F15.280-F15.282, F15.288, F15.29, F16.10, F16.120-F16.122, F16.129, F16.14,
	F16.150, F16.151, F16.159, F16.180, F16.183, F16.188, F16.19, F16.20, F16.220, F16.221,
	F16.229, F16.24, 16.250, F16.251, F16.259, F16.280, F16.283, F16.288, F16.29, F18.10,
	F18.120, F18.121, F18.129, F18.14, F18.150, F18.151, F18.159, F18.17, F18.180, F18.188,
	F18.19, F18.20, F18.220, F18.221, F18.229, F18.24, F18.250, F18.251, F18.259, F18.27,
	F18.280, F18.288, F18.29, F19.10, F19.120-F19.122, F19.129-F19.132, F19.139, F19.14,



	F19.150, F19.151, F19.159, F19.16, F19.17, F19.180, F19.181, F19.182, F19.188, F19.19, F19.20, F19.220-F19.222, F19.229-F19.232, F19.239, F19.24, F19.250, F19.251, F19.259, F19.26, F19.27, F19.280-F19.282, F19.288, F19.29			
BH Outpatient Visit	CPT: 98960-98962, 99078, 99202-99205, 99211-99215, 99242-99245, 99341, 99342, 99344, 99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99483, 99492-99494, 99510 HCPCS: G0155, G0176, G0177, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010, H2011, H2013-H2020, T1015			
	UBREV: 0510, 0513, 0515-0517, 0519-0523, 0526-0529, 0900, 0902-0904, 0911, 0914- 0917, 0919, 0982, 0983			
Partial Hospitalization or Intensive Outpatient	CPT Visit Setting Unspecified: 90791-90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875-90876, 99221-99223, 99231-99233, 99238-99239, 99252-99255 <i>with</i> POS : 52			
Outpatient	HCPCS Partial Hospitalization: G0410-G0411, H0035, H2001, H2012, S0201, S9480, S9484-S9485			
Visit Setting	UBREV: 0905, 0907, 0912, 0913 CPT: 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875,			
Unspecified	90876, 99221-99223, 99231-99233, 99238, 99239, 99252-99255			
onspecifica	<i>With</i> Outpatient POS: 03, 05, 07, 09, 11-20, 22, 33, 49, 50, 71, 72			
	or with Partial Hospitalization POS: 52			
	or with Non-residential Substance Abuse Treatment Facility POS: 57, 58			
	or with Community Mental Health Center POS: 53			
	or with Telehealth POS: 02, 10			
Substance Use	CPT: 99408, 99409			
Disorder Service or	HCPCS: G0396, G0397, G0443, H0001, H0005, H0007, H0015, H0016, H0022, H0047,			
Substance Abuse	H0050, H2035, H2036, T1006, T1012			
Counseling and	UBREV: 0906, 0944, 0955			
Surveillance	ICD-10: Z71.41, Z71.51			
Opioid Treatment	OUD Weekly Non-Drug Service HCPCS : G2071, G2074, G2075, G2076, G2077, G2080			
Services	OUD Weekly Drug Treatment Service HCPCS : G2067, G2068, G2069, G2070, G2072, G2073 OUD Monthly Office Based Treatment HCPCS : G2086, G2087			
Telephone Visits	CPT: 98966-98968, 99441-99443			
Online Assessments	CPT: 98970-98972, 98980, 98981, 99421-99423, 99457, 99458			
(E-visits or Virtual	HCPCS: G0071, G2010, G2012, G2250-G2252			
Check-in)				
	HCPCS: Weekly Treatment: G2067-2077			

Medications

Alcohol Use Disorder Treatment Medications		
Description	Prescription	
Aldehyde Dehydrogenase Inhibitor	Disulfiram (Oral)	
Antagonist	Naltrexone (Oral And Injectable)	
Other	Acamprosate (Oral; Delayed-Release Tablet)	

Opioid Use Disorder Treatment Medications

Description	Prescription
Antagonist	Naltrexone (Oral And Injectable)



Ways Providers can Improve HEDIS® Performance

- Consider using a validated screening tool (i.e., CAGE-AID, NIDA) or adding questions to your standard evaluation to identify substance use issues.
- Document identified substance abuse in the patient's chart and submitted a claim with the correct billing codes.
- Avoid inappropriate use of diagnosis codes that are the result of alcohol or drug dependency as these also qualify patients for the measures.
- Schedule follow-up visits within 14 days and at least two additional visits within 30 days or refer immediately to a behavioral health provider when giving a diagnosis of alcohol or other drug dependence. Send appointment reminder 72 hours prior to follow-up appointment. A **telephone and/or telehealth appointment** within the required timeframe meets compliance.
- Refer the member to a Molina Care Manager or work collaboratively with the Molina Care Manager if one is already assigned to help increase patient's access and motivation for treatment.
- Provide patient educational materials and resources that include information on the treatment process and options, including 12-step or mutual support meetings, encourage a sponsor, and other community-based programs.
- Utilize telehealth and home-based therapy where appropriate
- Potential consideration for providers:
 - For patients using long-term medication for pain, use code Z79.891 (long-term current use of opiate analgesic), which does not denote an SUD.
 - Use a "1" at the end of a substance use diagnosis code to document that the condition is in remission, e.g., F10.11, (Alcohol Use Disorder, Mild, In early or sustained remission).

Ways Health Plans can Improve HEDIS® Performance

- Provide member educational materials and resources that include information on the treatment process and options, including 12-step or mutual support meetings, encourage a sponsor, and other community-based programs.
- Utilize peer supports with lived experience to engage members and encourage continuation of treatment
- Educate members about the importance of timely follow-up visits after new diagnoses
- Audit, identify, and educate top 10 providers without follow-up after new diagnosis of SUD
- Provide culturally and linguistically appropriate communication that are accessible to all persons

Required Exclusions

- Members who use hospice services or elect to use a hospice benefit any time during the measurement period.
- Members who die any time during the measurement year.



All summaries of the measures contained herein are reproduced with permission from HEDIS[®] Volume 2: Technical Specifications for Health Plans by the National Committee for Quality Assurance (NCQA).

The information presented herein is for informational and illustrative purposes only. It is not intended, nor is it to be used, to define a standard of care or otherwise substitute for informed medical evaluation, diagnosis and treatment which can be performed by a qualified medical professional. Molina Healthcare, Inc. does not warrant or represent that the information contained herein is accurate or free from defects.

COPYRIGHT NOTICE AND DISCLAIMER

HEDIS[®] is a registered trademark of the National Committee for Quality Assurance (NCQA). The HEDIS measures and specifications were developed by and are owned by NCQA. NCQA holds a copyright in these materials and may rescind or alter these materials at any time. Users of the HEDIS measures and specifications shall not have the right to alter, enhance or otherwise modify the HEDIS measures and specifications, and shall not disassemble, recompile or reverse engineer the HEDIS measures and specifications. Anyone desiring to use or reproduce the materials, subject to licensed user restrictions, without modification for an internal non-commercial purpose may do so without obtaining any approval from NCQA. Use of the Rules for Allowable Adjustments of HEDIS to make permitted adjustments of the materials does not constitute a modification. All other uses, including a commercial use (including but not limited to vendors using the measures and specifications with a product or service to calculate measure results), or any external reproduction, distribution and publication of the HEDIS measures or results ("rates") therefrom must be approved by NCQA and are subject to a license at the discretion of NCQA. Any use of the materials to identify records or calculate measure results, for example, requires a custom license and may necessitate certification pursuant to NCQA's Measure Certification Program.

HEDIS measures and specifications are not clinical guidelines, do not establish a standard of medical care and have not been tested for all potential applications. The measures and specifications are provided "as is" without warranty of any kind. NCQA makes no representations, warranties or endorsements about the quality of any product, test or protocol identified as numerator compliant or otherwise identified as meeting the requirements of a HEDIS measure or specification. NCQA also makes no representations, warranties or endorsements about the quality of any organization or clinician who uses or reports performance measures. NCQA has no liability to anyone who relies on HEDIS measures and specifications or data reflective of performance under such measures and specifications.

Limited proprietary coding is contained in the measure specifications for convenience. Users of the proprietary code sets should obtain all necessary licenses from the owners of these code sets. NCQA disclaims all liability for use or accuracy of any coding contained in the specifications.

CPT^{*} codes, descriptions and other data are copyright 2024 American Medical Association (AMA). All rights reserved. CPT is a trademark of the AMA. Fee schedules, relative value units, conversion factors and/or related components are not assigned by the AMA, are not part of CPT, and the AMA is not recommending their use. The AMA does not directly or indirectly practice medicine or dispense medical services. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use.

Health Care Provider Taxonomy Code Set codes copyright 2024 AMA. The codes are published in cooperation with the National Uniform Claim Committee (NUCC) by the AMA. Applicable FARS/DFARS restrictions apply.

The American Hospital Association holds a copyright to the Uniform Billing Codes ("UB") contained in the measure specifications. The UB Codes in the HEDIS specifications are included with the permission of the AHA. All uses of the UB Codes may require a license from the AHA. Specifically, anyone desiring to use the UB Codes in a commercial product to generate HEDIS results, or for any other commercial use, must obtain a commercial use license directly from the AHA. To inquire about licensing, contact ub04@aha.org.

The American Dental Association (ADA) holds a copyright to the Current Dental Terminology (CDT) codes contained in certain measure specifications. The CDT codes in the HEDIS specifications are included with the permission of the ADA. All uses of the CDT codes require a license from the ADA. No alteration, amendments, or modifications of the CDT or any portion thereof is allowed. Resale, transmission, or distribution of copies of the CDT or other portions of the CDT is also not allowed. To inquire about licensing, contact CDT-SNODENT@ada.org.

Some measure specifications contain coding from LOINC[®] (<u>https://loinc.org/</u>). The LOINC table, LOINC codes, LOINC panels and form file, LOINC linguistic variants file, LOINC/RSNA Radiology Playbook, and LOINC/IEEE Medical Device Code Mapping Table are copyright © 1995–2024 Regenstrief Institute, Inc. and the Logical Observation Identifiers Names and Codes (LOINC) Committee and are available at no cost under the license at https://loinc.org/kb/license/.

"SNOMED" and "SNOMED CT" are registered trademarks of the International Health Terminology Standards Development Organisation (IHTSDO).

The CDC Race and Ethnicity code system was developed by the U.S. Centers for Disease Control and Prevention (CDC). NCQA's use of the code system does not imply endorsement by the CDC of NCQA, or its products or services. The code system is otherwise available on the CDC website at no charge.

Certain NullFlavor codes are owned and copyrighted by Health Level Seven International (HL7^{*}); 2024. "HL7" is a registered trademark of Health Level Seven International.

RadLex copyright 2014, The Radiological Society of North America (RSNA), all rights reserved. Licensed under RadLex License Version 2.0. You may obtain a copy of the license at: http://www.rsna.org/radlexdownloads/ This work is distributed under the above noted license on an "AS IS" basis, WITHOUT WARRANTIES OF ANY KIND, either express or implied. Please see the license for complete terms and conditions.

No part of this publication may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopy, recording or any information storage and retrieval system, without the written permission of NCQA.

© 2024 by the National Committee for Quality Assurance 1100 13th Street NW, Third Floor, Washington, DC 20005



